RI SOS Filing Number: 201921363380 Date: 7/19/2019 11:37:00 AM UCC FINANCING STATEMENT **FOLLOW INSTRUCTIONS** NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294 B E-MAIL CONTACT AT FILER (optional) filingacks@cscinfo.com SPRFiling@cscglobal.com C SEND ACKNOWLEDGMENT TO (Name and Address) 1671 39474 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Rhode Island (S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME Provide only gog Debior name (tallor tib) (use exact if ull name, do not omit imodify, or abbreviate any part of the Debtor's name), if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here. 🔝 and provide the Individual Debter information in item 10 of the Financing Statement Addendum (Form UCC1Ad) TA ORGANIZATION'S NAME BJORKLUND PAVING & CONSTRUCTION LLC SUFFIX ADDITIONAL NAME(SIGNITIAL(S) FIRST PERSONAL NAME 16 INDIVIDUAL'S SURNAME STATE 10 MAILING ADDRESS 17 FREESE ST POSTAL CODE COUNTRY RI 02908 **USA PROVIDENCE** 2 DEBTOR'S NAME Provide only one Debtor name (28 or 2b) (use exact full name, do not urnit, modify, or abbreviate any part of the Debtor's name), if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here 🔲 and provide the individual Debtor information in item 10 of the Financing Statement Addersdum (Form UCC1Ad) 28 ORGANIZATION'S NAME SUFFIX FIRST PERSONAL NAME (S)JAITIVIV(S) THAN LANOITICAL 25 INDIVIDUAL'S SURNAVE 2c MAILING ADDRESS STATE POSTAL CODE COUNTRY 3 SECURED PARTY'S NAME (or NAME of ASSIGNEF of ASSIGNOR SECURED PARTY) Frovide only give Secured Party name (3a or 3b) 3a CRGAN.ZATION'S NAMEWells Fargo Vendor Financial Services, LLC ADDITIONAL NAME(S)/(NITIAL(S) SUFFIX 35 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME KIOD JATZOS CITY SAF COUNTRY 3c MA LING ADDRESS PO Box 35701 59107 **USA** Billings MT is COLLATERAL. This financing statement covers the following columns.

This Financing Statement is to perfect Secured Party/Lessor's interest under a true lease transaction with the Debtor/Lessee. It is (i) being filed solely as a precaution in case, contrary to the intention of the parties, the transaction relating to the property described herein is adjudged to be other than a lease within the meaning of the Uniform Commercial Code, and (ii) not to be construed as an admission that said transaction is anything other than a true lease. This financing statement covers the equipment and other assets described below and/or on any annex, schedule and/or exhibit hereto (which is to be considered an integral part hereof), plus all existing and future replacements, exchanges and substitutions therefor, attachments, accessories, accessions and additions thereto, and insurance, lease, sublease and other proceeds thereof. Equipment: 1 Compact Track Loader, Serial# B47C13851, Model# T870

being administered by a Decedent's Personal Representative 5. Check only if applicable and check only one box. Collateral is held in a Trust (see UCC1Ad, item 17 and instructions). 6b. Check only if applicable and check only one box 6a. Check only if applicable and check only one box Non-UCC Fring Agricultural Lien Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility | Seller/Buyer Bailee/Bailor Licensee/Licensor 7. ALTERNATIVE DESIGNATION (if applicable) Lessee/Lessor Consignee/Consignor 8 OPTIONAL FILER REFERENCE DATA Indirect - 9423881001 - 2-7428581904 1671 39474